U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 8083	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Brian Mitchell	Name Nat'l Football League Players Assoc		
The second secon	Labor Organization File Number 065-533		
P.O. Box, Bldg., Room No., if any 6th Floor	P.O. Box, Building and Room Number, if any 6th Floor		
Street 2021 L Street, N.W.	Street 2021 L Street, N.W.		
City Washington	City Washington		
State District of Columbia ZIP Code + 4 20036	State District of Columbia ZIP Code + 4 20036		
5. Position in labor organization. Vice President			
	sions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or omenetary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.		
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any).	derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.		
6. Name and address of Employer (including trade name, if any). Name	on represents or is actively seeking to represent.		
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6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	on represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any:	7.a. Nature of Interest, Transaction, or Income.		
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income.		
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	7.a. Nature of Interest, Transaction, or Income.		
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.		
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. Perjury and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and in to the best of the		
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signa 15. Signature and verification. The undersigned declares, under penalty of F submitted in this report (including the information contained in any accompany)	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. Perjury and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and in to the best of the		

Name of Person Filing Brian Mitchell		File Number U-				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.						
8. Name and address of Business (including trade name, if any). Name Reebok International Ltd Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1895 J.W. Foster Boulevard City Canton State Massachusetts ZIP Code + 4 02021	9. Business deals with: a. Labor Organization b. Trust c. Employer					
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	*The dollar value of this dealing is in excess of \$1,000,000. It is difficult for me to ascertain this amount due to time and confidentiality restraints. 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Sneakers and Other Apparel for Activities Unrelated to the Union					
	12.b. Amount.	\$15,035				
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.						
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	DA., 1994, p. 1994				

Name of Person Filing Brian Mitchell		File Number U-	

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any). Name Sony Pictures Entertainment Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 10202 W. Washington Blvd. City Culver City State California ZIP Code + 4 90232 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City City	9. Business deals with: a. Labor Organization b. Trust c. Employer 11.a. Nature of such dealing. Licensing Arrangement	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	Cash Residual for TV Appearance	
	12.b. Amount.	\$486